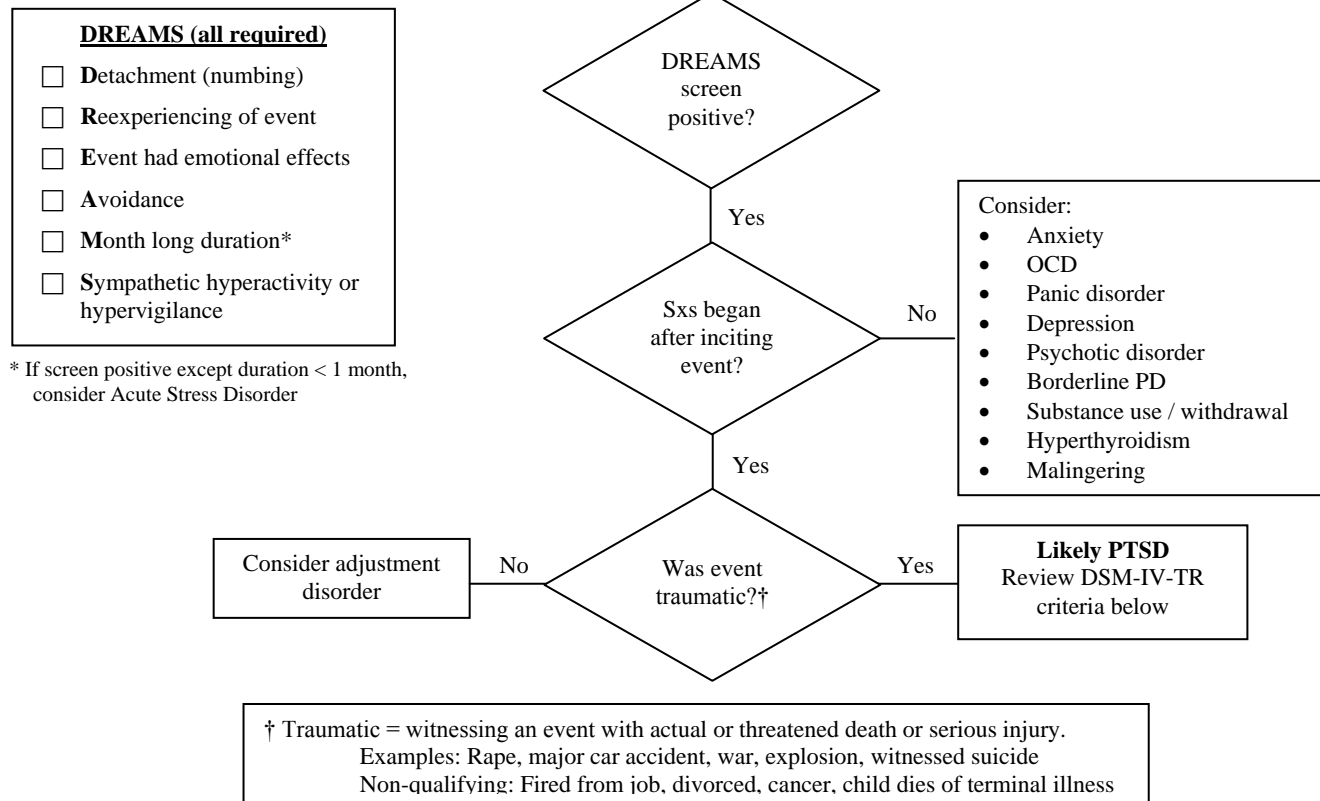


# Post Traumatic Stress Disorder (PTSD) Screening and Diagnosis Worksheet



## DSM-IV-TR Diagnostic Criteria

### Qualifying criteria (all required):

- ☐ Traumatic event: witnessed actual or threatened death or serious injury
- ☐ In response to trauma, experienced intense fear, helplessness or horror
- ☐ Symptoms > 1 month
- ☐ Symptoms cause significant distress or impairment of social functioning

### Symptomatic criteria:

Reexperiencing (1 or more required)	
<input type="checkbox"/> Recurrent, <b>intrusive recollections</b> of the trauma <input type="checkbox"/> Recurrent <b>distressing dreams</b> of the trauma <input type="checkbox"/> Feeling of <b>reliving the experience</b> (flashback, illusions, hallucinations)	<input type="checkbox"/> Intense <b>psychologic stress</b> on exposure to cues associated with the trauma <input type="checkbox"/> <b>Physiologic reaction</b> on exposure to cues (sweating, palpitations)
Avoidance / Numbing‡ (3 or more required)	
<input type="checkbox"/> Efforts to <b>avoid thoughts</b> , feelings, conversations about the trauma <input type="checkbox"/> Efforts to <b>avoid activities</b> , people, places that arouse recollection of the trauma <input type="checkbox"/> <b>Inability to recall</b> an important aspect of the trauma	<input type="checkbox"/> Markedly <b>diminished interest</b> in significant activities <input type="checkbox"/> Feeling <b>detachment / estrangement</b> from others <input type="checkbox"/> <b>Restricted affect</b> <input type="checkbox"/> Sense of <b>foreshortened future</b> (does not expect to have career, marriage, children)
Hypervigilance‡ (2 or more required)	
<input type="checkbox"/> <b>Insomnia</b> <input type="checkbox"/> <b>Irritability</b> or outburst of anger <input type="checkbox"/> <b>Difficulty concentrating</b>	<input type="checkbox"/> <b>Hypervigilance</b> <input type="checkbox"/> <b>Exaggerated startle response</b>

‡ To count, symptom must have started after the traumatic event

# PTSD Treatment Recommendations and Tips

## Prevalence

- Vietnam veterans, 27% of women and 31% of men
- Iraq and Afghanistan veterans, 12.5% and 6.2% respectively
- Wounded combat veterans, 20%, compared to 3% of unwounded veterans
- Rape victims, 46% of women and 65% of men
- Automobile accidents, 13.8% of women and 25% of men

Comorbidity: Very common, 50-88% according to NCS and NVVRS

- Major depressive disorder
- Alcohol abuse (more common in males)
- Anxiety spectrum disorders (GAD, specific phobias, social phobias, agoraphobia)
- Personality disorders (anti-social, borderline, paranoid)
- Suicidality

## Treatment

- Cognitive Behavioral Therapy (CBT) and/or an SSRI.
- Limited study has found that there is no difference in efficacy between combined CBT and SSRI compared to each monotherapy alone.
- There are no placebo-controlled RCTs directly comparing psychotherapy to SSRI treatment.
- Sertraline and paroxetine are the only FDA approved SSRI's for treatment of PTSD.
- Benzodiazepines are generally discouraged, as they only provide short-term relief and can lead to dependence in a population that has a higher risk of substance abuse. Benzodiazepines can also reinforce avoidance and numbing coping mechanisms.
- Consider adjuvant treatment for resistant symptoms, such as nightmares and insomnia, with prazosin or an atypical antipsychotic.

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## ***Information from Your Family Doctor***

### **What You Should Know About Post-traumatic Stress Disorder**

*Am Fam Physician.* 2003 Dec 15;68(12):2409.

#### **What is post-traumatic stress disorder (PTSD)?**

PTSD is an illness (sometimes called an anxiety disorder) that can happen after a traumatic event. The event may be a serious car crash, a natural disaster such as a hurricane or an earthquake, military combat, or a crime such as rape.

Not everyone develops PTSD after a traumatic event. Those who do may feel alone, or they may feel guilty that they survived when others did not. In people with PTSD, anxiety can last for months and even years after the event.

#### **How can I tell I have PTSD?**

Your doctor can tell you have PTSD by talking with you about your symptoms and experiences. If you have PTSD, you may have vivid nightmares, flashbacks, and bad memories. You may not be able to stop thinking about the traumatic event. Any reminder of the event may cause fear or panic.

If you have PTSD, you may get an upset stomach or a headache when you are reminded of the event. You may try to avoid thoughts, feelings, people, and places that are connected with the traumatic event. You may have trouble falling asleep or staying asleep. You may feel irritable or become angry easily. You may have trouble paying attention.

#### **How is PTSD treated?**

Your doctor may prescribe a medicine for depression or anxiety. You should try to be consistent with sleep habits.

Talking to a mental health professional also can help. This therapy usually consists of weekly or monthly sessions that last about one hour each.

With treatment, symptoms of PTSD usually get better within a few months. However, some people with PTSD may need treatment for a long time.

Here are some things that you can do to help yourself:

- Take your medicine just the way your doctor tells you.
- Try to lie down to sleep at the same time every night.
- Have a place to sleep that is dark and quiet, and has a comfortable temperature.
- Try not to eat within two hours of lying down to sleep.
- Get regular physical exercise and eat a balanced diet.

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This handout is provided to you by your family doctor and the American Academy of Family Physicians. Other health-related information is available from the AAFP online at <http://familydoctor.org>.

This information provides a general overview and may not apply to everyone. Talk to your family doctor to find out if this information applies to you and to get more information on this subject.

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## Patient Community Resources

Contra Costa Crisis Center – resource and referral clearing house. Possible referral to sliding scale counseling services.

<http://www.crisis-center.org/>

Dial 211

National Center for PTSD – information for veterans and general public

<http://www.ptsd.va.gov/public/>

(802) 296-6300

VA PTSD Program Locator – for VA patients

[http://www2.va.gov/directory/guide/ptsd\\_flsh.asp](http://www2.va.gov/directory/guide/ptsd_flsh.asp)